CITY OF HOMEDALE

PO Box 757 Homedale, ID 83628

BARTENDER LICENSE APPLICATION FEE: \$25.00

Name:			
Address:			
Phone:	Email:		
Other names used (including	maiden name):		
Date of birth:	Height:	Weigh	nt:
Race:	Eye color:	Hair o	color:
Social Security #:	D	Driver's License #:	
Spouse name:			
Spouse address (if different):			
Previous address (if less than	5 years):		
Past beer/liquor related emplo	oyment (past 5 years):		
Where will you be employed?			
Have you ever been convicted	d of a felony?	o Yes	Year:
Explain:			
Have you ever been denied a	bartender license?	☐ No	Yes
State:	Ye	ear:	
I swear under penalty of perju	iry that the above is true an	d correct, and I have prov	vided the City of
Homedale a copy of my photo	•	-	•
until I have received my offici		-	
by the Chief of Police and Cit	-	passing of a such ground	encen unu upprovui
,	<i>y</i>		
Applicant Signature:		Date:	
Fee paid			
Copy of photo ID	attached		
	of Police		
Approval by City (
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